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PTO/SB/01 (10-00)
Approved for use through 10/31/2002. OMB 0651-0032
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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)))	Attorney Docket Number	101-0005US
	First Named Inventor	Michael E. Barrett
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ENHANCED POPULARITY RANKING

the specification of which (Title of the Invention)

☒ is attached hereto
OR
☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above:

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application	Foreign Filing Date	Priority	Certified Copy Attached?	
			YES	NO
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)

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[Page 1 of 2]

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10047666 011502

DECLARATION — Utility or Design Patent Application

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Address

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State

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Country

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Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :



A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Michael E.

Family Name

or Surname Barrett

Inventor's
Signature

Date

1/04/2002

Residence: City

Westborough

State MA

Country USA

Citizenship US

Mailing Address 28 Piccadilly Way

Mailing Address

City Westborough

State MA

ZIP 01581

Country USA

NAME OF SECOND INVENTOR:



A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Alan

Family Name

or Surname Levin

Inventor's
Signature

Date

Residence: City Vancouver

State BC

Country Canada

Citizenship US

Mailing Address 655 West 13th Avenue #108

Mailing Address

City Vancouver

State BC

ZIP V5Z 1N8

Country Canada

☐ Additional inventors are being named on _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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	First Named Inventor	Michael E. Barrett
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	Examiner Name	

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NAME OF SOLE OR FIRST INVENTOR :☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Michael E.

Family Name
or Surname

Barrett

Inventor's
Signature

Date

Residence: City Westborough

State MA

Country USA

Citizenship US

Mailing Address 28 Piccadilly Way

Mailing Address

City Westborough

State MA

ZIP 01581

Country USA

NAME OF SECOND INVENTOR:☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Alan

Family Name
or Surname

Levin

Inventor's
Signature

Date 12-31-01

Residence: City Vancouver

State BC

Country Canada

Citizenship US

Mailing Address 655 West 13th Avenue #108

Mailing Address

City Vancouver

State BC

ZIP V5Z 1N8

Country Canada

☐ Additional inventors are being named on _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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PTO/SB/81 (10-00)

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Application Number

Filing Date

First Named Inventor

MICHAEL E. BARRETT

Group Art Unit

Examiner Name

Attorney Docket Number

101-0005US

I hereby appoint:

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29855

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☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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OR

☐ Firm or
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Cynthia Pevehouse

Cynthia Pevehouse
General Counsel

Signature

Date

1/14/02

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple

☐ *Total of _____ forms are submitted.

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